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APPLICANTS

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** CONTINUING DATA ***** *HCP*** FOREIGN APPLICATIONS ***** *HCP*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

09/25/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NH	SHEETS DRAWING 6	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Hatch Pham</i> Examiner's Signature Initials				

ADDRESS

21013

TITLE

System and method for determining the operational status of an imaging system including an illumination modulator

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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